



St. Helens Council

Case ID Number:

DEPRIVATION OF LIBERTY SAFEGUARDS FORM 7 SUSPENSION OF AUTHORISATION

Full name of the person who is subject to the standard authorisation

Date of birth (or estimated age if unknown)

Est. Age

Name and address of the care home or hospital stated on the Standard Authorisation Granted

Person to contact at the care home or hospital, (include ward details if appropriate)

Name

Telephone

Email

Ward

Current location of the person who is subject to the Standard Authorisation

Name of the Supervisory Body

NOTICE THAT THE STANDARD AUTHORISATION HAS BEEN SUSPENDED

The above person no longer meets the eligibility requirement for a standard deprivation of liberty authorisation under the Mental Capacity Act 2005.

The Standard Authorisation previously given is therefore suspended from the time this notice is given.

The effect of this notice is that the standard authorisation no longer authorises the care home or hospital to deprive the person of their liberty.

REASON WHY THE PERSON NO LONGER MEETS THE ELIGIBILITY REQUIREMENT

Please select one of the reasons below:

The person is now detained in a hospital under one of the following sections of the Mental Health Act 1983: sections 2, 3, 4, 35-38, 44, 45A, 47, 48 or 51.

Accommodating the person in this care home or hospital now conflicts with a requirement imposed upon them in connection with their liability to detention under the Mental Health Act 1983.

Accommodating the person in this care home or hospital now conflicts with a requirement imposed on them under a Community Treatment Order.

Accommodating the person in this care home or hospital now conflicts with a Guardianship Order

Signed
(on behalf of the Managing Authority):

Signature

Print Name

Position

Date Authorisation Suspended

